PART B - FEE(S) TRANSMITTAL

plete and send this form, together with applicable fee(s), to: Mail

09-02-04

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INSTRUCTIONS This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate A maintenance fee notifications

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

06/03/2004

Wendy W. Koba P.O. Box 556 Springtown, PA 18081

(Authorized Signature)

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Wendy W. Koba	(Depositor's name)
Wendy Wikolo	(Signature)
91112004	(Date)
	-

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/899,797	07/05/2001	Anthony Francis Sleva	SLEVA-001	3742

TITLE OF INVENTION: INTERRUPTIBLE POWER SUPPLY MODULE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	ISSUE FEE PUBLICATION FEE		ISSUE FEE PUBLICATION FEE		SUE FEE PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330 665		\$300	\$1630945	09/03/2004					
EXAN	MINER	ART UNIT		CLASS-SUBCLASS							
TOATLEY,	GREGORY J	2836		307-038000	_						
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>		orrespondence	names of agents OR firm (havi agent) and	ting on the patent front page up to 3 registered patent, alternatively, (2) the name ng as a member a registered the names of up to 2 registered or agents. If no name is listered.	attorneys or 1 Wer to f a single 1 attorney or 2 stered patent	ndy W. Koba					

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

## Sleva Associates, Inc.

Allentown PA 18103-3604

Please check the appropriate assignee category or cate	🗖 individual	☐ corporation or other private group entity	government	
la. The following fee(s) are enclosed:	4b. Payment of Fee(s):			
Issue Fee	A check in the amou	int of the fee(s)	is enclosed.	
Publication Fee	☐ Payment by credit c	ard. Form PTO-	2038 is attached.	

☐ Advance Order - # of Copies ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number \_\_\_\_\_\_ (enclose an extra copy of this form). (enclose an extra copy of this form).

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(Date)

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09/03/2004	NVCEVNO	VVVVV33	A0000707
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665.00 OP

PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032

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## Complete if Known **FEE TRANSMITTAL** Application Number Filing Date for FY 2004 First Named Inventor

Affective 10/01/2003. Patent fees are subject to annual revision. **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Art Unit 965.00 TOTAL AMOUNT OF PAYMENT Attorney Docket No.

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	None 3. ADDITIONAL FEES					
Order Order	Large Entity   Small Entity					
Deposit Account:	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Account Number	1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit Account	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name The Director Is authorized to: (check all that apply)	1053	130	1053		Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	_,	For filing a request for ex parte reexamination	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Description Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month	
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$)	1452	110	2452	55	Petition to revive - unavoidable	
		1,330	2453		Petition to revive - unintentional	1 1 1
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)	665
Total Claims		480	2502		Design issue fee	
		640	2503		Plant issue fee	
Claims -3	1460	130	1460		Petitions to the Commissioner	
Laco Estitus Cast Salita	1807	50	180		Processing fee under 37 CFR 1.17(q)	
Large Entity   Small Entity Fee Fee   Fee Fee Fee Description	1806	180	180		Submission of Information Disclosure Stmt	
Code (\$)	8021	40	802	1 40	Recording each patent assignment per property (times number of properties)	
1201 86 2201 43 Independent claims in excess of 3	1809	770	280	9 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	281	0 385	For each additional invention to be	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	examined (37 CFR 1.129(b))  Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802		•	
and over original patent			١,		of a design application	200
SUBTOTAL (2) (\$)				Pub		300
**or number previously paid, if greater; For Reissues, see above	*Redu	iced by	Basic	Filing F	ee Paid SUBTOTAL (3) (\$) <b>Q</b> (	25.00
SUBMITTED BY					(Complete (if applicable))	
Name (PrinkType) Wendy W. Koba		Registra Attorney		· 3	0509 Telephone 60-346	0-7112
Signature Wester Wet Ollo					Date Q I	400B

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PTO/SB/21 (04-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE it displays a valid OMB control number. aperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless Application Number **TRANSMITTAL** Filing Date **FORM** First Named Inventor Art Unit (to be used for all correspondence after initial filing) **Examiner Name** Toatl Attorney Docket Number Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance communication Fee Transmittal Form ISSUE to Technology Center (TC) Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Terminal Disclaimer Identify below): Extension of Time Request 1. Return receipt postcard Request for Refund **Express Abandonment Request** a. Express Mail Cert. CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Individual name Signature Date CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name

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Signature

Date

2004



## **EXPRESS MAIL CERTIFICATE OF MAILING**

## Paten

Patent Application for:
Applicants: Anthony Francis Sleva
Atty. No: OO
Title: Interruptible Power Supply Module
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Type or Print name of person signing this certificate: Wendy W. Koba, Esq.
Signature: Wenoly W-Kola